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IN THE UNITED STATES PATENT AND
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                                      TRADEMARK OFFICE
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                                                 Atty. Docket No: 1597-1070
      Applicant: ROSENDORF, CHARLES
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                                                 Examiner: WASYLCHAK, Steven R.
      Serial No: 09/848,191
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                                                 Group Art Unit: 3624
      Filed: May 3, 2001
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                 SECURITIES ANALYSIS METHOD AND SYSTEM
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       For:
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       Mail Stop AMENDMENT
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       Commissioner for Patents
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       United States Patent and Trademark Office
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       P.O. Box 1450
       Alexandria, Virginia 22313-1450
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                          Re: Office Paper mailed October 13, 2004
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                              AMENDMENT UNDER 37 C.F.R. $1.111
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       Sir:
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                   This amendment is in response to the Office Action mailed October 13,
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       2004, to which a response is due by January 13, 2005. Therefore, this response
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       is timely filed.
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## LAW OFFICE MP NOVICK RECEIVED **CENTRAL FAX CENTER**

JAN 1 3 2005

LAW OFFICES OF MITCHELL P. NOVICK

66 PARK STREET MONTCLAIR, NEW JERSEY 07042 FAX (973) 744-2227 (973) 744-5150

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 09/848,191 Filing Date TRANSMITTAL 05/03/2005 First Named Inventor ROSENDORF, Charles Hillel FORM Art Unit **Examiner Name** WASYLCHAK, Steven R. (to be used for all correspondence after initial filing) Attorney Docket Number 1597-1070 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC 1 Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Fee Attached Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Petition Amendment/Reply Petition to Convert to a Proprietary Information Provisional Application After Final Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify Terminal Disclaimer below): Extension of Time Request Request for Refund **Express Abandonment Request** CD. Number of CD(s) Information Disclosure Statement Landscape Table on CD Remarks Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Law Offices Of Mitchell P. Novick Signature Printed name Mtichell P. Novick, Esq. Reg. No. Date 30,305 01/13/2005 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature

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Effective on	Complete if Known						
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Numbe	ation Number 09/848,191			
FEE TRANSMITTAL			Filing Date	05/03/200	05/03/2001		
For FY 2005			First Named Invent	or ROSEND	ROSENDORF, Charles Hillel		
			Examiner Name	WASYLC	WASYLCHAK, Steven R.		
Applicant claims small entity status. See 37 CFR 1.27			Art Unit	3624	3624		
TOTAL AMOUNT OF PAYMEN	т (\$)	180.00	Attorney Docket No	o. 1597-107	0		
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
Deposit Account Deposit Account Number: Deposit Account Name:							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) Indicated below, except for the filing fee							
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information and authorization on P	TO-2038.	·					
FEE CALCULATION							
1. BASIC FILING, SEARCH	, AND EXAM ILING FEES	INATION FEES	RCH FEES E	EXAMINATION	I FFFS	,	
F	Small E	Entity	Small Entity	Small	<u>Entity</u>	es Paid (\$)	
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Design 2	200 100		<b>50</b> ·	130 6			
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2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues)  Small Entity Fee (\$) Fee (\$) 50 25							
Each independent claim of	over 3 (include	ding Reissues)			200 10		
Multiple dependent clain	ns				360 18	-	
37 —	tra Claims		e Pald (\$) 강 O		ultiple Depender Fee (\$) Fe	e Paid (\$)	
HP = highest number of total clair	O x ms paid for, If gre	ater than 20.		•			
indep, Claims   Ex	tra Claims	Fee (\$) Fe	e Paid (\$)				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE  15 the precification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)							
100 = / 50 = (round up to a whole number) x							
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)							
Other (e.g., late filing surcharge): Information Disclosure Statement \$180							
SUBMITTED BY							
ignature Mithell P. Minish Registration No. 30,305 Telephone 973-744-515						744-5150	
	(Attorney/Agent)				Date 01/13/2005		

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